

**Work Order ID 123911**

Thursday, August 28, 2014 4:00:30 PM

**\*123911\***

Page 1

Item ID: D4635-1

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Fwd Ceiling Panel, LH

Start Date: 9/01/14 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 9/19/14 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 140829

Tooling:

Date:

Run Start

**\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D4635

E

100

0.00

**\*100\***

HAND FINISHING THERMOFORMING

Thermoform

Memo

0.00

Thermoforming Machine

Cut Blanks

DAS

07

9-89

X (

14/08/09

105

0.00

**\*105\***

Dry Material

HandThermo

Memo

0.00

Hand Finishing Thermoforming

Dry Sheet as per QSI022 POLYCARBONATE

DAS

07

9-89

X (

14/08/09

Temp: 245 deg

AUG 29 2014

Time IN: 5:00 PMTime OUT: 6:00 AM

Per.....

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**Work Order ID 123911**

Thursday, August 28, 2014 4:00:30 PM

**\*123911\***

Page 2

Item ID: D4635-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Item Name: Fwd Ceiling Panel, LH

Stop **\*NS2\***Start Date: 9/01/14 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 9/19/14 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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110

0.00

**\*110\***

THERMOFORMING MACHINE

Thermoform

Memo

0.00

Thermoforming Machine

Thermoform as per Dwg. D4635-1 and Folio FTA147

Dwg. Rev. EFolio Rev. D

NOTE: Check moulds prior to using to ensure proper placement of add-ons.

Visually inspect for proper formation and texture

X1PAS  
07  
9-89

14/08/28

130

0.00

**\*130\***

HAND FINISHING THERMOFORMING

Thermoform

Memo

0.00

Thermoforming Machine

Trim to Finished Dimensions

X1

314/09/16

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**Work Order ID 123911**

Thursday, August 28, 2014 4:00:30 PM

**\*123911\***

Page 3

Item ID: D4635-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Item Name: Fwd Ceiling Panel, LH

Stop **\*NS2\***Start Date: 9/01/14 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 9/19/14 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

140

QC6- Inspect dimensions to drawing  
Dimensional Inspection

0.00

Smp  
14/9/16**\*140\***

QC

Memo

0.00

Quality Control

Fill out Inspection Sheet Rev A

① 14-09-16 PD

150

QC5- Inspect part completeness to step on W/O

0.00

**\*150\***

QC

Memo

0.00

Quality Control

N/A

✗

160

Packaging

0.00

**\*160\***

Packaging

Memo

0.00

Packaging

mf

Smp  
14/9/16

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**Work Order ID 123911**

Thursday, August 28, 2014 4:00:30 PM

**\*123911\***

Page 4

Item ID: D4635-1      Accept      **\*N900040100\***      Setup      Start      **\*NS1\***  
Revision ID:      Stop      **\*NS2\***  
Item Name: Fwd Ceiling Panel, LH  
Start Date: 9/01/14      Start Qty: 1.00      **\*1\***      Cust Item ID:  
Required Date: 9/19/14      Req'd Qty: 1.00      **\*1\***      Customer:  
Reference:

Approvals:      Process Plan:      Date:      Tooling:      Date:      Run      Start      **\*NR1\***  
QC:      Date:      SPC (Y/N):      Date:      Stop      **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
170	QC21- Final Inspection - Work Order Release	0.00							
<b>*170*</b>									
QC	Memo	0.00							
Quality Control									

14/9/17

At 4-a-17

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Picklist Print

Thursday, August 28, 2014 4:00:34 PM

Page 1

Work Order ID: 123911

**\*123911\***

Parent Item: D4635-1

**\*D4635-1\***

Parent Item Name: Fwd Ceiling Panel, LH

Start Date: 9/01/14

Required Date: 9/19/14

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev. A New Issue 12/05/07 DL VERIFIED BY:JLM IPP Rev. B  
Dwg. Update 12/11/08 DL IPP Rev. C Dwg Update  
13/07/09 DL IPP Rev D Dwg Update, Material  
Change 14/01/20 DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.093-F6006-07		Purchased	No			100	sf	3,973.393	25.27	26			<b>DAS 07 9-89</b>
<b>*MI FXS 093-F6006-07*</b>									<b>**</b>				
GE PLASTICS LEXAN SHEET (Grey)													

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT023	3973.39332	
114459	229.26	
123105	38	
124501	543.5	
m128668	181.35	
m129014	102.33332	
m129471	175	
<u>m129738</u>	2703.95	

14/09/02

26 sg Ph

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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8

7

6

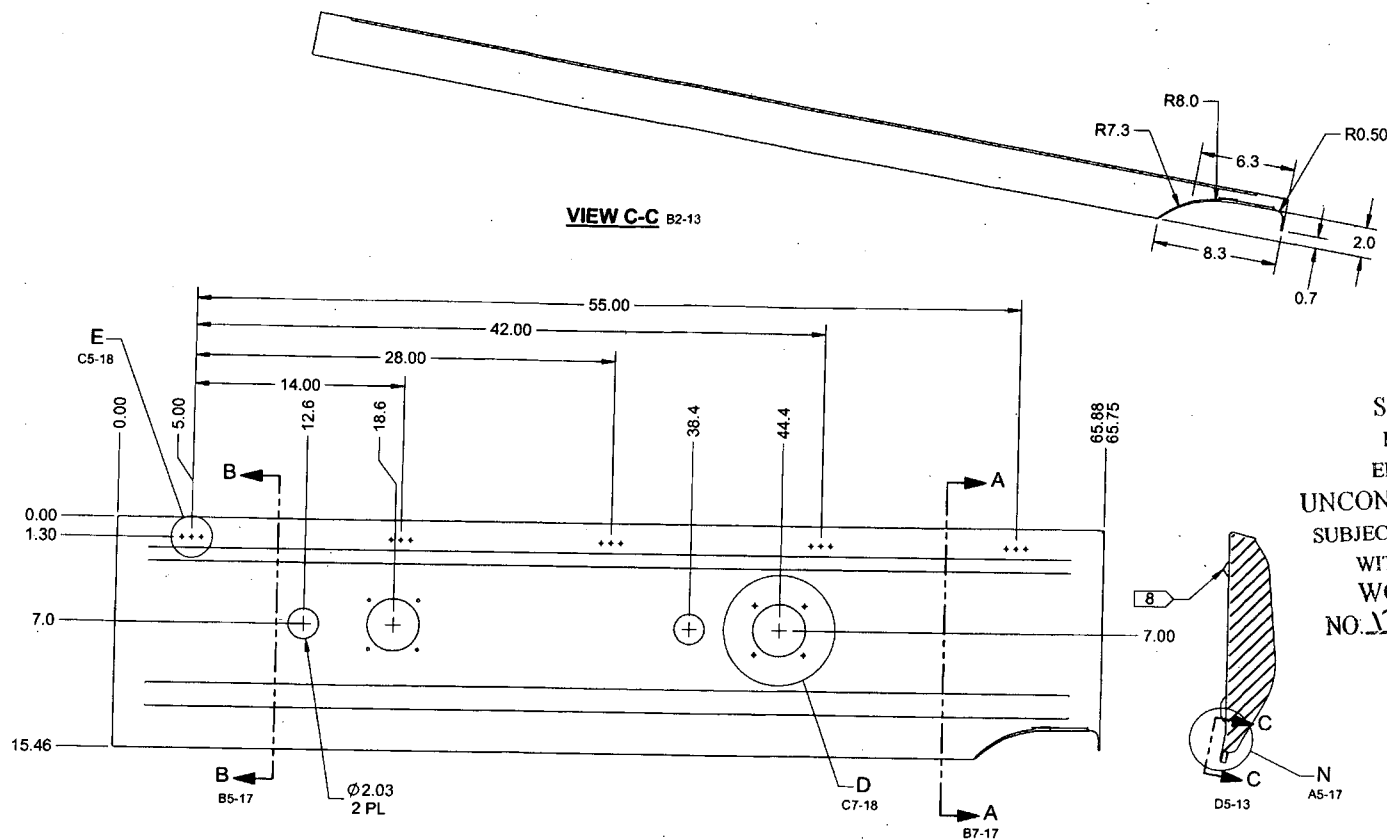
5

4

3

2

1

**VIEW C-C B2-13**

SHOP COPY  
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ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 123911 MLS  
140829

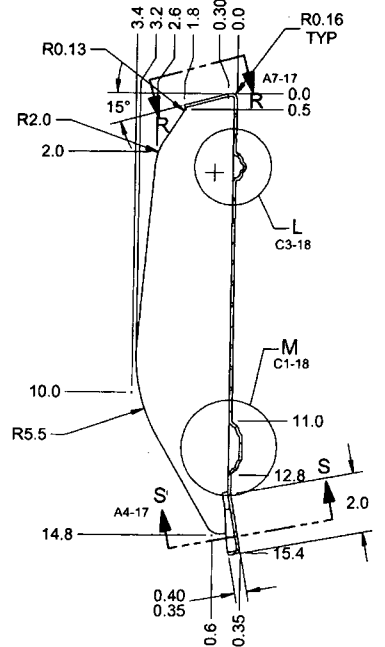
**NOTES:**

- 1) MATERIAL: F6006 SUEDE/POLISHED GY5B133 LIGHT GREY LEXAN SHEET 0.093 THICK (REF DART SPEC MLEXS.093-F6006-07)
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 4.39 lbs
- 8) TEXTURE ON THIS SIDE
- 9) TRIM D4635-1 PER TOOL DT9839
- 10) THERMOFORM D4635-1 PER QSI 022 USING DT9847 TOOL  
MIN. THICKNESS AFTER FORMING:  
SHADED AREA = 0.040  
RIDGES/EDGES = 0.060  
ELSEWHERE = 0.070

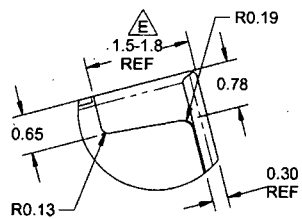
**D4635-1 LH, FWD CEILING PANEL**

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2014-01-22

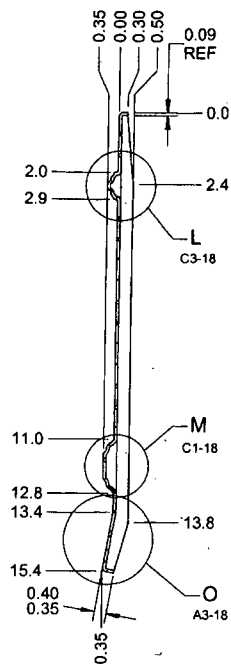
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DRAWN	RF		
CHECKED	PC	DRAWING NO.	REV. E
MFG. APPR.	PC	D4635	SHEET 13 OF 18
APPROVED	PC	TITLE	SCALE
DE APPR.	PC	OUTBOARD CEILING PANELS	NTS
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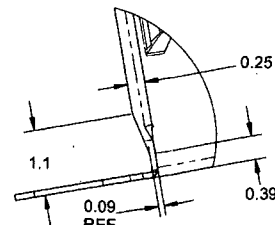
**SECTION A-A**  
**SECTION A-A' OPPOSITE**  
**SCALE 2X**



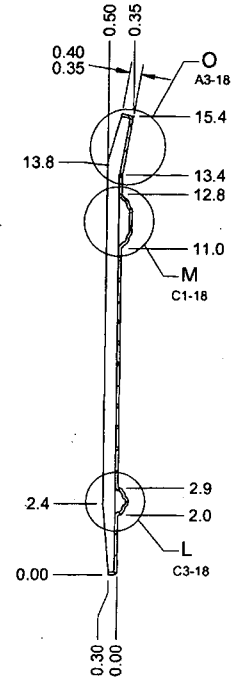
**AUXILIARY VIEW R-R**  
**SECTION R-R' OPPOSITE**  
**SCALE 2X**



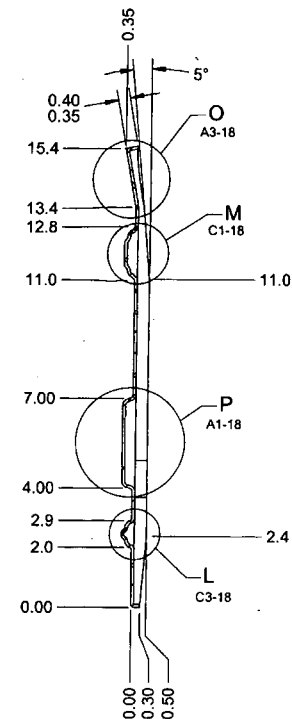
**SECTION B-B**  
**SCALE 2X**



**AUXILIARY VIEW S-S**  
**SECTION S-S' OPPOSITE**  
**SCALE 2X**



**SECTION G-G**  
**SCALE 2X**

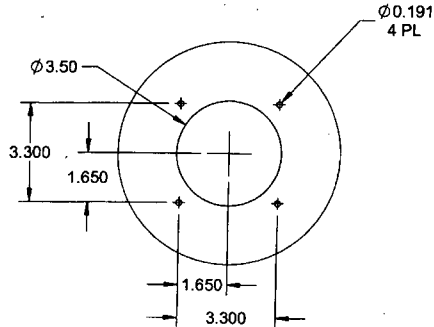


**SECTION K-K**  
**SCALE 2X**

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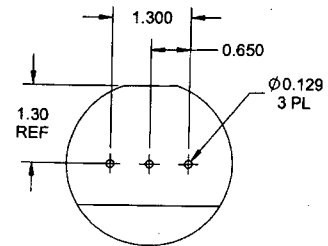
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DRAWN	RF		
CHECKED	BC	DRAWING NO.	REV. E
MFG. APPR.	BC	D4635	SHEET 17 OF 18
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8 7 6 5 4 3 2 1



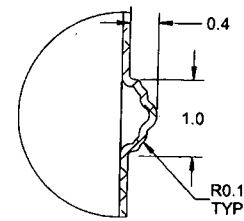
**DETAIL D**  
SCALE 2X

B4-13  
B3-14  
B5-15  
B5-16



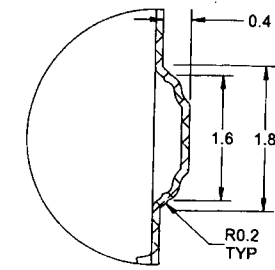
**DETAIL E**  
SCALE 4X

C7-13  
B6-14  
C6-15  
B5-16



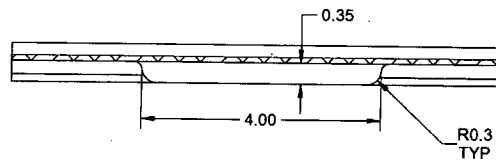
**DETAIL I**  
SCALE 1.5X

B2-17  
B4-17  
C5-17  
C7-17



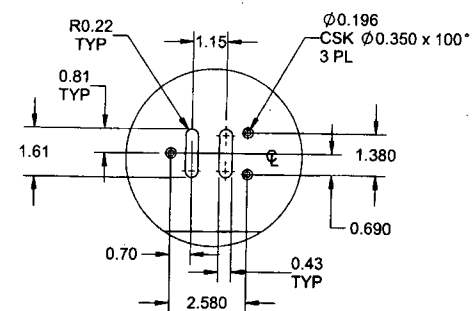
**DETAIL M**  
SCALE 1.5X

C2-17  
C3-17  
C5-17  
C7-17



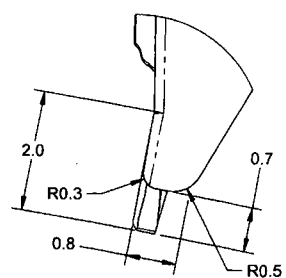
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B5-16



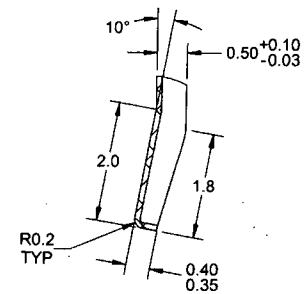
**DETAIL Q**  
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C5-16



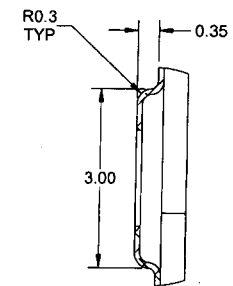
**DETAIL N**  
SCALE 2X

B2-13



**DETAIL O**  
SCALE 2X

D2-17  
D3-17  
B5-17



**DETAIL P**  
SCALE 4X

C2-17

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8 7 6 5 4 3 2 1

<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	B123911
<b>Description:</b> LH Fwd Ceiling Panel		<b>Part Number:</b>	D4635-1
<b>Inspection Dwg:</b> D4635 <b>Rev:</b> E		<b>Page 1 of 1</b>	

### FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
14.00	+/-0.030	14.00	✓		S Feb 21	
28.00	+/-0.030	28.00	✓		"	
42.00	+/-0.030	42.00	✓		"	
55.00	+/-0.030	55.00	✓		"	
5.00	+/-0.030	5.00	✓		"	
12.6	+/-0.100	12.6	✓		"	
18.6	+/-0.100	18.6	✓		"	
38.4	+/-0.100	38.4	✓		"	
44.4	+/-0.100	44.4	✓		"	
1.3	+/-0.100	1.3	✓		"	
7.0	+/-0.100	7.0	✓		"	
7.00	+/-0.030	7.00	✓		"	
Ø2.03	+0.012/-0.001	2.034	✓		S Feb-02	
Ø0.191	+0.005/-0.001	.1945	✓		"	
Ø3.50	+0.012/-0.001	3.556	✓		"	
3.300	+/-0.010	3.296	✓		"	
1.650	+/-0.010	1.6494	✓		"	
Ø0.129	+0.005/-0.001	.1289	✓		"	
1.300	+/-0.010	1.3006	✓		"	
0.650	+/-0.010	0.6498	✓		"	
0.35 - 0.40	+/-0.030	0.368	✓		"	
0.30	+/-0.030	0.308	✓		"	
0.50	+/-0.030	0.514	✓		"	

DAS  
27  
9-89

<b>Measured by:</b>	<b>Audited by:</b> PD	<b>Preliminary Approval:</b>
<b>Date:</b> 14/9/16	<b>Date:</b> 14.09.16	<b>Date:</b>

Rev	Date	Change	Revised by	Approved
A	14.07.29	New Issue	KJ	